To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Committee PO Box 256 Madison, W

Return by,

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.  THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.					
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CON	
1. Print: Mai Thao sign: Mai Shao	street: 5881 Roanoke Dr.	Town Village City  City  (Municipality Name)	11 /15/2011 (Month) (Day) (Year)	Email  Mail  Phone  (608	
Sign: RANDY Hoffmerster	Street: 3536 SABAKA TA  City: UERONA WI Zip: 53593	MTown □ Village □ City	///3/201) (Month) (Day) (Year)	Email  RHO  Phone  (608)	
Sign: Paul Zueh Ike	street: 5406 Vicar In  City: Madison zip: 53714	Town Village  City  Maclisan  (Municipality Name)	1( //5/20 <u>//</u> (Month) (Day) (Year)	Phone (608)	
4. Print: Margaret Knyka Sign: toangaret Knyke	street: 210 Lynne Circle  Giv: Verona zip: 53593	Town   Village   VCTO   Variety   (Municipality Name)	/	Email  Kry Phone  (606)  Email	
5. Print: Sol ANABEL ROPE 16 VET Sign: Dendel My	Street: 5839 Devolo Rd.  City: Fitchburg, (W) zip: 5371)	Town Village Toty  Fitchbuy  (Municipality Name)	// //5/20_//_ (Month) (Day) (Year)	Email 5 orodo	
I. David R Gilbert Pedison	Certification of Circulator  Certify): I reside at   Circulator's Paridones Street Name and No.	Madisan		Circulators,	

I, Dord R Gilbert Pedison (certify): I reside	Certification of Circulator	Madisa
I, Dou'd Regional Printed Name of Circulator), (certify): I reside	at	(Circulator Municipality)
I personally circulated this recall petition and personally obtained each of the s named in this petition. I know that each person signed the paper with full know recall petition. I am aware that falsifying this certification is punishable under	ledge of its content on the date indicated opposite his or her name. I know the	or district represented by the officeholder eir respective residences given. I support this
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Return by Committee PO Box 256

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1. Print: GloRGK R.VIZ	street: [103 Whispering prime way	Town Usulfage Usity Fifchlory (Municipality Name)	11 / 4 20_1 (Month) (Day) (Year)	Phone ((e))	
2. Print: My 115 Kenseth Sign: Phyllis Konseth	city: Fitch burg zip: 53113  street: 2962 Wads Edge Way  city: Fitch burg WI zip: 53711	Town Civillage City  Fithburg  (Municipality Name)	// //2/20_//_ (Month) (Day) (Year)	Email Phone	
3. Print: JAMES R WOLF Sign R Wolf	Street: 2406 WHITLOCK Rd  City: Madison Zip: 53717	Town Village SCity  Mad I SON (Municipality Name)	// //5/20_// (Month) (Day) (Year)	Phone	
4. Print: Tracy Burandt Sign: Jauce Burandt	Street: 1401 Main St.  City: Cross Plains zip: 53528	□ Town  ☑ Village □ City  Cross Plains (Municipality Name)	// //5/20/( (Month) (Day) (Year)	Email burance Phone (608	
5. Print: Lisa B. Henderson sign: Lisa B. Henderson	street: 6434 Ton brooke In.  City: Madison, WI zip: 53719	Town Uvillage City  MaddSon (Municipality Name)		Email Phone	
Dovid R Gilbert-Peders	Certification of Circulator  (certify): I reside at Circulator's Residence - Street Name and Nu	Madison (Circulator Munici	Tro S	Circulators,	

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder

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Phone

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1. Patricia J. Vollenwe sign: Patricia J. Vollenweid	Street: 300 Valley //w 3	Town Uvillage City (Municipality Name)		Vollen Phone (LOS )
ahw & Butcher	Street/OS Sefferson City: Oelona zip: 53593	□ Town □ Village VE IN OW A (Municipality Name)	///5/20 (Month) (Day) (Year)	Phone (608)
3. Print: Terra Rock Sign: Ola Rock	street: 4213 Portland PKWY  City: Madison Zip: 53714	□ Town □ Village ■ City  MadiSon  (Municipality Name)	// / 5/20 1 (Month) (Day) (Year)	Email Phone ( ( ( ) 0 ( ) )
sign: Becky P. Rose	Street: S57 Hemlack Dr City: Verona, WI zip: 93593	O Town O Village O City O (Municipality Name)	// //5/20 <u>//</u> (Month) (Day) (Year)	Phone ( )
5. Print: Thomas P. Collier Sign: TO Plul	Street: 2705 Country ViewRd	M Town   Village   City   Vl vova (Municipality Name)		Phone (6 US)
I David R Gilbert-Rodotter	(certify): I reside at 367 E Lakes is Certification of Circulator	Mach 300		

(Printed Name of Circulator)	(Circulator's Residence - Street Name and Number)	(Circulator Municipality)
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named in this petition. I know that each person signed	ally obtained each of the signatures on this paper. I know that the signers are electors of the dthe paper with full knowledge of its content on the date indicated opposite his or her nan	e jurisdiction or district represented by the officeholder ne. I know their respective residences given. I support thi
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Tamarah Rtoltan Arno	I Jamaiale Hobbare	Street: 8411 Ander Trace Dr. City: Verona WI zip: 53693	Trown Springdale City	11/15/20 <u>11</u> (Month) (Day) (Year)
Mindy Brewning	Mindy Breining	street: 8666 Cty, Rd. Y city: Sauk (ity, Wl zip: 53583	Town Squh city	/15/20 <u>[]</u> (Month) (Day) (Year)
Carri Hale	Cavietale	street: 14 Krystana Way  city: Wadson Wzip: 63711	Town Village Maj Sur	[] / 15/20 (Month) (Day) (Year)
1. Linda Perez	Lunda M Perez	street: 5695 Nutme St City: Fitchburg zip: 53711	Town Village Fitchburg	/1 /15/2011 (Month) (Day) (Year)
Joseph W. Maurer	Joseph W. Marrier	Street: 2838 McKenna Blud  City: Madison, W1 Zip: 53719	Town Village M & disar	
Tammy M. Makwer	Dammer M. Malline	Street: 316 N. Nine Mounded City: Verona WI Zip: 53593	Town Village Recity Venna	// (5 /20 ) \ (Month) (Day) (Year)
Roland Perez 8. Cheryl Christenson	alako	street: 5695NUtane  City: Fitchburg WIZip: 53711	Town Village Fitchburg	Month) (Day) (Year)
·	Charge Christer	street: 414 W. Harriet St.	Town Village Verona	// /5/2011 (Month) (Day) (Year)
9. Sarah Domres	Surson	Street: 279 Meadowside Drive City: Veven a zip: 53593	Town Village Verona	/15/2011 (Month) (Day) (Year)
Jaren Bailey	Jaren Baily	Street: 7238 Tempe Dr City: Madison W1 zip: 53719	Town Village Madison	
	, U Certification	of Circulator		
David R Gilbert - Ad	effor	tify): I reside at 362 & latteride 56	Mad 180m	
(Name of Circul	lator)	(Circulator's Residence – Street name an	d Number) (Circulator I	Aunicipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or har name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats. (Signature of Circulator) (Day) (Month) (Year)

Email

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Bernadine Hoak	Lunastie Haak	Street: 1349 Deane Ave	Town Village, City Delleville	///5/20// (Month) (Day) (Year)	I		
Randy Haak	^	Street: 1347 Plane Ave City: Belleville Wi zip: 53508	Drown Ryillage City Belleville	( / / 5/20/1 (Month) (Day) (Year)			
J. /	1	Street: 675 Acadia Way  Otty: UDNONA WI zip: 53593	Town Village Verona	11 /15/2011 (Month) (Day) (Year)			
Kerstin Nelson	Kendithel	Street: 1459 E. Main St Apt2d City: Madison zip353703		11 /15/20 11 (Month) (Day) (Year)	1     1		
Jennifer Murphy	mum	street: 5697 Modernaire St city: Fitchburg W1 zip:53711	Town Village Fitchburg	11 /15/2011 (Month) (Day) (Year)			
Margaret Fuguitt	Mazada Fres	Street: 5041 LaCrosse Lane City: Madison WI Zip: 53705	Town Village Pitty  Madison	/// 5/20_// (Month) (Day) (Year)	]		
Ann Kruse	Cennt. Kruse	Stree 2124 Hilldale Land City Stoughton, WI zip: 53589	DTown Village DCity  Stoughton	// //5/20// (Month) (Day) (Year)	]		
8. Rita Wedslerspoon	Reta Weddingoon	Street: 67/ Maph Pol City: Venona, W/ Zip:53593	Town Village Sity Verona	// //5/20// (Month) (Day) (Year)	]		
fatti Halverson	Patti Staluer Son	Street: 3010 Shady Dak lane City: Verona zip: 53593	Town Village City Verona	// /5/20_// (Month) (Day) (Year)			
Barb Banch	Bowl Bounds	street: 2917 Praint Rd  City: Madison WI zip: 53719	Town Village Madison	(Month) (Day) (Year)			
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David	R	Gilbert-	Pedergo	n	Certifi	cation of Cir	culator eside at 362	٤	LaHeside	st	Maditan
V	ed this rec		of Circulator				(Circu	lator's	: Residence – Street	name and Number)	(Circulator Municipality) named in this petition. I know that each person signed
											eation is punishable under S.12.13(3)(a), Wis. Stats.  Page No. (Official Use Only)
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Circulator Phone

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Return by Jan
Committee to
PO Box 2569
Madison, WI

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1. Print: LAUVI & LAUSON Sign: Heurie Keusen	Street: 14 Cavendish Ct, City: Madison zip: 53714	Town Village City (Municipality Name)	/\ //5/2011 (Month) (Day) (Year)	Email  Lavson			
2. Print: Max Varner Sign: Mal Varne	Street: 1813 Maplecrest Dr  City: Verona zip: 53593	□ Town □ Yillage □ City  Mad! So ~  (Municipality Name)	// // 5/20/1 (Month) (Day) (Year)	Phone (GOC)			
3. Print: Deborah Szarka Sign: Olborah Garka	Street: 10900 Cave of the Mounds  City: Blue Mounds WI zip: 53517	D Town  Stillage City  Blue Mound 5  (Municipality Name)	)   //5/20 <u>/</u> / (Month) (Day) (Year)	Phone (608)			
4. Corinne Walsh sign: Courine Walsh	street: 328 Westridge PKWY  City: Verona zip: 53593	Town Village City  (Municipality Name)	[[ /15/20 <u>]                                    </u>	Phone (60%)			
5.  Print: Melinda Dossis  Sign: Welindal Dainy	Street: 3033 Waunona Way  City: Madison zip: 53713	□ Town □ Village    XCity   Madison   (Municipality Name)	// //5/20 <u>]/</u> (Month) (Day) (Year)	Menol Phone (608)			
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□ City 11/15/2011 Phone zip: 53714 Sheridan Street Email ☐ Town 11/15/2011 Ruth Ann Stodola □ Village Phone City Madison (Month) (Day) (Year) Email ☐ Town ☐ Village City Phone City: MAdEUN zip: 537/6 Email Town Village Madi5 MARINAC Phone Email Phone

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			City: V C KO/V/	<u> </u>	<u> </u>	1
10. James J	waujill	James Just 2m	street: 436 Dunh.	11.Dr. zip: 53593	Town Village RCity	1 /(5/2011 (Month) (Day) (Year)
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David R	Gilbert-februs		, (certify): I reside at	E Lakeside S	Mydozon	·
	(Name of Circu	lator)	(Circulate	or's Residence – Street name an	d Number) (Circulate	or Municipality)
			know that the signers are electors of the juri			
paper with full knowl	ledge of its content on the date indi	cated opposite histor her name. I know their	respective residences given. I support this re	ecall petition. I am aware that falsify	ing this certification is punishable under S.	12.13(3)(a), Wis. Stats.
1) '	15 /20 [/	1 W 3			Page No.	. (Official Use Only)
(Month)	(Day) (Year)		(Signature of Circulator)			61

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY U	SED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS			Madison, WI
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTA
1.  Print: Paivild Tenewein  Sign: Joseph Druin	sired: 58C5 Roanoke Dr city: Fitchburg zip: 53719	Town Village City  (Municipality Name)	// /25/20 <u>//</u> (Month) (Day) (Year)	Phone (408)
2. Print: Elizabeth Falberg sign Galth Follery	street: 26 Dolores G-	Town   Village   Madi Sov   (Municipality Name)		Email  Phone  ( )
3. Print: Sharon Mork Sign: Sharon Mork	Street: P.O. Box 107  City: McFayland, WJ zip: 53558	Town So Village City MC Farland (Municipality Name)	11 /15/20/1 (Month) (Day) (Year)	Phone (608)
4. Print: Jason Holland Sign: Aban Holland	Street: 3806 Drumlin Ln  City: Madison Zip: 53719	□ Town □ Village □ City  Mod 7Son (Municipality Name)	/15/20 <u>  </u> (Month) (Day) (Year)	jase, h Phone (608)
5. Print: Gayle Ellis Sign: Payle Ellis	street: 2576 Tonto Tr  City: Verona zip: 53593	Ser Town   Village   City   L CON OL (Municipality Name)	////6/20 <u>//</u> (Month) (Day) (Year)	Email  Fac      Phone  (608)
Dovid R Gilbert-Pederson	Certification of Circulator 362 E Lakeside	st_ Madison		Circuitata

I personally circulated this recall petition and personally obtai	ned each of the signatures on this pa	per. I know that the signers are electors of the juris	diction or district represented by the officeholder
named in this petition. I know that each person signed the pap	er with full knowledge of its content	t on the date indicated opposite his or her name. I le	
recall petition. I am aware that falsifying this certification is p	unishable under \$.12.13(3)(a), Wis.	Stats.	
	4//	2	

(Circulator's Residence - Street Name and Number)

(Printed Name of Circulator)

il .	15	/20 ll	X/a-th	Page No. (Official Use Only)
(Month)	(Day)	(Year)	(Signature of Circulator)	#_1162

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Please include your co

(Circulator Municipality)

Return by Ja

Committee to

PO Box 2569

Email

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

PRINTED NAMES OF ELECTORS  Jannette McMunn	purposes, when different than municipality signatures of electors  Jannalle McMuny	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.  Street: 1653 Tamurack Way	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
		Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	
Jannette McMunn	Jannallo M. Muny	Street: 1653 Tamarack Way	ПТочи	
		City: Verona WZ zip: 53593	Town Verona  British	// /19/20// [Month) (Day) (Year)
Sandra 5. C	Janda J.	Street: 2009 MICH ROOD	Town Village MAD 154N	$\frac{11}{15/20} \frac{15}{15}$ (Month) (Day) (Year)
Heather Thorpe	Listhy Shope	city: MAD 150N WI zip: \$3719  street: 1813 Redwood Ln.  City: Madison ; zip: 5371/,	Town Village City  Madi Son	// /5/20// (Month) (Day) (Year)
Kim Schwenn	Lun Delmenn	Street: 38 VAFNUK WAY City: FILMNUNG ZIP: 53911	Town Usuffage Fifthory	
Theryl Burbank	Cheylpurlank	Street: 609 Parklyly Dr. City: Mt. Horeb, WI 253577	Drown Village Wt. Horeb	(Month) (Day) (Year)
LOIS BUCK	Laisbrul	Street: 1664 Barchent City: FITCH BURG Zip: 53575	Town Fire HBURG	//////// (Month) (Day) (Year)
Edniund Brick	E.M. Brick	Street: 1664 BORCHEST Rd City: FITCH burg W/Zip: 53575	Town Village Fitchbuzg	///5/20 <u>f</u>   (Month) (Day) (Year)
Ingu Midthun- Hensen	anzi midthe Har	Street: 6743 Co DD I	Tetown Uillage City	1\/\[\(\sigma\) \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Kevin F Hoffman	Land Ho) from	City: Venona Wr Zip: 53593	Destrown   Village   Springdule	(Month) (Day) (Year)
Ann Frederickson	ans M. Duden	street: 2501 Homestead Rd  City: Madison w Zip: 53711	Town Village Madison	11/15/20
David R Gilbert- Rec (Name of Circul		of Circulator  19: I reside at (Circulator's Residence - Street name and	st Madison	Municipality)

the paper with full knowledge of its content on the date indicated opposite his or her name. I know that each person signes the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats. Page No. (Official Use Only) (Signature of Circulator) (Year) (Month) (Day)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by Jan Committee to PO Box 2569 Madison, WI

Please include your conto

THE MOREAL ALITY	SED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS			t
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTA
1. Print: Ann Hoffmeister	Street: 3536 Sabaka Tr.	▼Town □ Village □ City	11 /15/20 // (Month) (Day) (Year)	Email  ahof Phone
Sign: ann Hoffmeista	city: Vetona WI zip: 53593	Verona (Municipality Name)	(Month) (Day) (Year)	(608)
2. Brenda K. Hein	Street: 110 Mer ham Drive	☐ Town ☐ Village	11 /15/2011	Email
sign: Brenda K. H	city: Madison zip: 53705	Madison (Municipality Name)	(Month) (Day) (Year)	Phone ( )
3. Terie Leffin	street 721 Roualia Dr	□ Town □ Village SCity	11/15/201	Email Mtle
sign: Yew Hy	city: Ulrona zip. 53593	(Municipality Name)	(Month) (Day) (Year)	Phone (608)
4. Print: DICK QUINN	Street: 523 ACADIA WAY	□ Town □ Village ▼City	"   .d "	Email
and the contraction of the contr	City: VERDNA Zip: 53593	(Municipality Name)	// /5/20// (Month) (Day) (Year)	Phone ( )
5. Print: Falynn Prohaska	street: 3848 Maple Grove Dr. Unit 313	☐ Town ☐ Village ☑ City	1) /15/>	Email pro
sign: Jaly Prohash	city: Madison zip: 53719	Madi'son (Municipality Name)	11 /15/2011 (Month) (Day) (Year)	Phone (Leos)
David R Gilbert Peder	Certification of Circulator 367 E Lawsich St  (Circulator's Besiden St	Madison		Circulators.

م د م م	Cei unicauvii di Cii cuiatui	
David R Gilbert Pedoton (certify): I reside at	362 E Laneside s	t Madison
(Printed Name of Circulator)	(Circulator's Residence - Street Name and	Number) (Circulator Municipality)
ersonally circulated this recall petition and personally obtained each of the signed in this petition. I know that each person signed the paper with full knowle all petition. I am aware that falsifying this certification is punishable under S. Marchael (Month) / (Day) / 20 / (Year) (Signature) (Signature)	edge of its content on the date indicated opposite his	ectors of the jurisdiction or district represented by the officeholder or her name. I know their respective residences given. I support the

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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Committee to 1
PO Box 2569

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.  THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.				
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTAC
Print: Angela Fridsch  Sign: Angela Litt	Street: 6801 CTHM  City: Verona Zip: 53593	A Town ☐ Village ☐ City  Velora  (Municipality Name)	11 /15/20/1 (Mouth) (Day) (Year)	Email Crullable Phone (608)
2. JEFREY C. WHITE Sign: John Dung	Street: 744 WHALEN RD  City: VERNA WL. Zip: 53593	□ Town □ Village □ City  (Municipality Name)	// //5/20// (Month) (Day) (Year)	Email  Wye (w)  Phone  (608)
Signatuple a Waldagan	Street: Steph Waldypoon 671 MAPLE RB City: VEKONA-WI Zipe 53583	☐ Town ☐ Village ☑ City (Municipality Name)	// //3/20 <u>//</u> (Month) (Day) (Year)	Phone (OPS ) 8
4. Print: Jacob Mittag  Sign: Yacab Milling	Street: 3848 Maple Grove Dr., 4917313  City: Madison zip: 53719	Town   Village   STCity   Mad. Son   (Municipality Name)	[\ /15/20 <u>11</u> (Month) (Day) (Year)	Phone ( )
5. Print: Randall Newtson Sign: Pandall (Pandson)	Street: 3115 Limekin St.	☐ Town ☐ Village ☐ City  (Municipality Name)	1 1 /(5/20 <u>11</u> (Month) (Day) (Year)	Randy O Phone (608)
I, David R Gilbert-Pederson	Certification of Circulator  (certify): I reside at  (Circulator's Paridonal Street Name and No.	Madison	in the N	Circulators,

David IL Onles	(certify): I reside at	1. lota.sa
(Printed Name of Circulator)	(Circulator's Residence - Street Name and Number)	(Circulator Municipality)
	- Ne A	

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Please include your contac
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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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Committee to 1
PO Box 2569
Madison, WI 5

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Please include your contact
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THE MUNICIPALITY	THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.  THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.					
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTAC		
1. Print: Toy Ludtke Sign: Day Ludske	street: 7143 Mockingbird Ln.	Town Village  City  Middle Con  (Municipality Name)	///5/20// (Month) (Day) (Year)	Phone (608)		
Print: Diana Varner Sign: Diana Varner	Street: 1813 Maplecrest City: Verona Zip: 53593	Town Village MACity  (Municipality Name)	// // 5/20/1 (Month) (Day) (Year)	Phone (608)		
3. Diana E Troubride sight Diana E Troubride	Street: 503 Westlawn Cir City Verona Zip: 53593	Town Village City  (Municipality Name)	// /15/20 // (Month) (Day) (Year)	Email   Mom m   Phone   (608)   8		
4. Print: Mark Gehrig Sign: Male Feli	street: 1811 Vilas Av.	Town   Village   City   Makison   (Municipality Name)	(Month) (Day) (Year)	genrigs Phone (648)		
5. Print: Kirster Sott  Sign: Krister Scott	Street: 1115 Drumlin Dr.  Gity: Verana WI zip: 53593	Town Uvillage  City  Verona (Municipality Name)	11 /15/20 <u>11</u> (Month) (Day) (Year)	Email  dkcp:  Phone  (608)		
. David R Gilbert-Peders	Certification of Circulator	٠. ١ ٠				
· Iterated It (+) best Tital ka	3GT F Lakeside St	Machina				

(Printed Name of Circulator), (certify): I reside at 367 E Lakeside St. (Circulator's Residence – Street Name and Number) (Circulator Municipality)  I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.    Page No. (Official Use Only)   Page No. (Official Use Only)   # 1166		_		<i>a</i> .		· COLUM	LICEUROBE OF C	ii caiatoi	· ·
(Circulator's Residence – Street Name and Number) (Circulator Municipality)  If personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.    Page No. (Official Use Only)   Page No. (Offici	, David	R	Gilbert-1	Cot 502, (ce	ertify): I reside a	at 362 E	Lakesid	e st	Madi5~
named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.    Page No. Official Use Only)		(Pri	nted Name of Cir	culator)	•	(Circulator's	Residence – Stre	et Name and Number)	(Circulator Municipality)
	named in this percent percent in the percent perition. I	etition. am aw	I know that each pe rare that falsifying the	rson signed the pap his certification is p	per with full knowl punishable under S	ledge of its contents.12.13(3)(a), Wis.	nt on the date indica . Stats.	signers are electors of the ju ed opposite his or her name.	I know their respective residences given. I support this

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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THE MUNICIPALITY (	SED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS	Y OF RESIDENCE, IS NOT SUFFICIENT. S BE LISTED.		Madison, WI 5
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTAC
1. Print: Beth Rodriguez Striz sign: Best Modeign Stryc	City: Verona zip: 53593	Town Uvillage City  (Municipality Name)	11 / 15 / 20 11 (Month) (Day) (Year)	Email bastrize Phone (608)7
signification of the significant	Street: 1379 Keller Rd  City: Mt Horeb, WI zip: 53572	Town  Village City  Perry Township  (Municipality Name)	11/15/20 <u>11</u> (Month) (Day) (Year)	Email  Coul brain  Phone  (608)
sign: Enca Fox ochriq	street: 1811 Vilas Avc.	Town Village Detry  (Municipality Name)	1\ /1\\\\ 20_1\\\\\\(\Day\)\\\\(\Day\)\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Phone (608)
si Linda Crossen	oregon  City Hartson Zip: 63575	Town   Village   City   (Municipalis) Name)	1	Email    Icken   Phone   (408) 8
5. Print: Cindy Muralles Sign Lydy Mulles	street: 2698 Norwich St.	Town Uplage Ucity  The box (Municipality Name)	\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Email  Cindur  Phone  (608) 6
I, Did R Gilbert - Pederson	Certification of Circulator  Certify): I reside at Circulator's Residence - Street Name and Nu	Mad Jon (Circulator Munic	i. He S	Circulators,

Please include your Phone

Page No. (Official Use Only)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

(Month) (Year)

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Madison, WI

THE MUNICIPALITY U	SED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS			Madison, WI
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTA
1. Prints Susan K Wainwright	217 Jenna Dr Street:	☐ Town ☐ Village  St-City	11 /15/2011	Email
sign: Selson K Warnight	cur. Verona WI zip. 53593	(Municipality Name)	(Month) (Day) (Year)	Phone ( )
Print: Jon Rebholz	street: 1106 Drumlin Dr.	☐ Town ☐ Village ECity	11 /15/2011	Email
Sign:	au. Verona WI zip. 53593	Municipality Name)	(Month) (Day) (Year)	(608)
3. MARGE POWELL	Street 4695 PIERCEVILLE Rel	P Town	-04  1 /15/2011	
Maycrowell	COTTAGE CLOVE, WIL 53527	Sun Thanh 12 (Municipality Name)	(Month) (Day) (Year)	Phone ( )
Print: Larry Gundlach	Sirect: 5/7 Wingra St. #/	□ Town □ Village Strity  Mad you	//  /5 20 <u>//</u>	Email
Sign: Ky	city: Madison zip: 53715	(Municipality Name)	(Month) (Day) (Year)	Phone ( )
5. Brent Corless	street: 604 East View Ct.	□ Town □ Village XI City Veron9	11 /15/20_[	Email Jbch Phone
Sign: July	City: Verona, WI Zip: \$953593	(Municipality Name)	(Month) (Day) (Year)	(608)
I, Den ide & Wheet Relian, (Printed Name of Circulator)	Certification of Circulator  Certify): I reside at 362 E Cheside st  (Circulator's Residence - Street Name and Num		ipality)	Circulators, Please include your conta
•	tained each of the signatures on this paper. I know that the signers are elector			Phone Phone

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED MUNICIPALITY OF RESIDENCE DATE OF SIGNING PRINTED NAMES OF ELECTORS SIGNATURES OF ELECTORS STREET & NUMBER OR RURAL ROUTE (Indicate Town, City, or Village) Rural address must also include box or fire no. 11 /15/20/1 Mhs 7 ☐ Village ☐ City **YZ**City Email ☐ Town ☐ Village Phone zip: 53711 City Email □ Village Phone **Sci**ty Email 5. Willer Dr Village City Phone Engail dag □ Town □ Village City Email Blazingster Lu Phone Email Phone HICHBURG WI Email Virgin Lake Drive 11/15/2011 ☐ Village (b08 Email ~ 209 Westlaun Ave enny ☐ Village 6008 11evona **Certification of Circulator** 

(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality) I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats. ๖ (Signature of Circulator) (Month) (Day) (Year)

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	СО	
Teacy E. Pareatt	Strong Perrett	Street: 329 Cruscantst City: Mazomania WI zip: 53560	□ Town  ▼Village □ City  Mazannan x4	// //S/20// (Month) (Day) (Year)	Email  + Tack  Phone  (Loog)	
Camilla A. OBrien	Canilla OBrien	Street: 3042 Springfield Rd. City: Cross Plains, WI zip: 53528	Town XVillage Cross Plains	///5/20 <b>4</b> (Month) (Day) (Year)	Phone ( )	
Glleen Mize	Cell ?	Street: 3745 Sequoia Trl City: Verana 53543WI	Town Uillage Middleton	(Month) (Day) (Year)	Email Phone	
HARVET KAUFFMAN	Horvey Touffmor	Street: 8682 N My Newal PTRU  City: C vos & Plains Zip: 53555	Trown Utillage City Middleton	// //5/20_/(Month) (Day) (Year)	Email Phone	
Tracy L. Oller	HO	street: 1721 Mainst Apt A  City: Cross Plains WI zip: 53528	□ Town Willage	11 /15/20_11 (Month) (Day) (Year)	Email  tracylyn  Phone  (408)	
Kay Brabender	Kach Brobender	Street: 1800 Hall City: Black Each (14) 71p: 53515	□ Town    Town   Village   City   Black Farth	// /5 /20// (Month) (Day) (Year)	Email Phone	
	Dorere L. Disch	Street: 607 Haslen City: New Glanes Wi zin 53574	Town Styllage City NGW GLARUS		Email Phone	
Pam Del Angel	tam Od angel	Street DKW. Exchange Street  City Mazomanie Zip: 53560	n II		Email Phone	
michelle zaly	Marile Righ	Street: 425 US Hwy 14# 35 City: Lone ROCK WT Zip: 53556	Town Village Lone Rock	/  5/20      (Month) (Day) (Year)	Email Phone	
BERNARD BACK	Demand Sach	7771	Town  No City BALEA INTH	//5/20// (Month) (Day) (Year)	Email Phone	
DAVIDR FA	Certification of the control of the	of Circulator hify): I reside at 2506 C hunches 14	Village CASSININS	R 8 F N F 53528	g Circulators	

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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LAURICE W Galson	Lawie Wonler	Street: 1368 Hickory St CHYP ROSS P/A/AS W. Zip: 53528	Town  Willage Cass Planes  City  City  City	(Month) (Day) (Year)	En
Digna M. Stain	Dear My Ster	Street: S 6957 Canty Rd PF City: North Freedom Way: 53951	Xrown   Freedom   City	// /5 /20_// (Month) (Day) (Year)	En
Jerrem F Maier	Jerrem 7 mais	Street: 5618 County P City: C1055 Phins zip: 53588	Town Uillage City	11/15/2011 (Month) (Day) (Year)	En
BILL PEISS	BU Pa	Street: 610 BARTELS  City: MONONA Zip: 53716	Town Uillage MONONA	11 / 15/20_11 (Month) (Day) (Year)	En
Susan MLoger	Susan M Loger	Street: 1810 East Street City: Black Earth W1 zip: 53515	Town Black Earth	11/15/20_11 (Month) (Day) (Year)	Pho
Jane Bautch	Jone Boutch	Street: 2610 Elmwood Circle W City: Cross Plain zip: 53528	Town Coss Village City Plams	1) /15 /20 i) (Month) (Day) (Year)	Ph
i. BarbaraEWalser	Barbaro E. Walser	Street: 5650 Pine Road  City: Black Earth Zip: 53515	Solven Servit	///5/20// (Month) (Day) (Year)	Ph
Romayne Sieb	Romayne Sieb	Street: 8297 W. Hill Point Rd. City: Cross Plains zip: 53528	Town Givillage Benny	// //5 / 20_// (Month) (Day) (Year)	En
9.	Jacqueline Laves	Street: 4163 N. Birch TV.  City: CV055 Plains ziz53528	Town Cross Plains	// //S/20// (Month) (Day) (Year)	Pho
JIM BENNETT		Street: 6238 HWY 78 N City: MAZONANIE Zip:53560	Dillage MAZOMANE	// \$\/20[] (Month) (Day) (Year)	Em
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he paper with full ki	nowledge of its content on the date indicated o	pposite his or her name. I know their respecti	ve residences given. I support this rec	all petition. I am aware that falsifying this certif	fication is punishable un	der S.12.13(3)(a), Wis. Stats.
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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes,

Ma THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. VOTING PRINTED NAMES OF ELECTORS SIGNATURES OF ELECTORS STREET & NUMBER OR RURAL ROUTE MUNICIPALITY OF RESIDENCE DATE OF SIGNING CO Rural address must also include box or fire no. (Indicate Town, City, or Village) Email Phone Email Town Village Phone Email Phone Email

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5.		Street: 2704MILITARY Pd	Drown CROSSIL AINS	1 - 12011	Email
LUCILLE Blythe	1 /	City: CROSSPLAINC ZIDS 3528	□ City	(Month) (Day) (Year)	Phone
6.	out the first	City: CROSSILATAC Zip.S 35 & S	□ Town	<del>                                     </del>	Email
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	1,	City: Zip:	□ City	(Month) (Day) (Year)	( )
7.	Henry	Street: 2011 Julius 51	□ Town □ Willage C T 0 5 5	11/15/20/2/	Email
Henry Bollernd	1 2 Ameria	City: Cross Pupilitszip: 53528	City PLA/15	(Month) (Day) (Year)	Phone ( )
8.	11/1	Street: /// WIWITSON ST #608	Town	11 /15/2011	Email
LINDY Krantz	may went	city: Madisun zip: 53703	Grity Madison	(Month) (Day) (Year)	Phone (Ala)
9.	O LAN LO	street: 431 Water St #202	From France & Sce	11 /15/2011	Email
Samantha Schultz	Samon 1-22	Cary: Prainie du See zip: 53578	☐ City	(Month) (Day) (Year)	Phone ( )
10.	0	street: 1725 Ludden Dr	□ Town	11 / 15/2011	Email
Beth Hamilton	Beth Hamilton	chy: Cross Plains zip: 53528	City Cross Plains		Phone ( )
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Pamela Z. Cash	man, (certi	ify): I reside at 5082 Reeve Rd.	Town of Bla	ack Earth	Circulators, p
(Name of Circul	lator)	(Circulator's Residence - Street name and	d Number) (Circulator M	<b>I</b> unicipality)	Phone
cisonany chemated and recall pention and personally obt	ained each of the signatures on this paper. I know that the	he signers are electors of the jurisdiction or district represented by the	officendider named in this petition. I know the	at each person signed	

I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under (Day)

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Mary # Dollerule	Morel a Bollenca	City: Cross Plains.	zip: 53528	ity Choss Plains	(Month) (Day) (Year)
8. Apolonia L. Caya	Apolonia X Caya	Street: 8 (5% Stage Co	zip: 53528	own illage Cross Plains	[// 9 20
CAROLYN J. Stoppleworth	and stopphinate	Street: 2106 Misty M	14m   The state of	illage	// / 15 20 // (Month) (Day) (Year)
Linda K.Johnson	Sinda L. Johnson	Street: 10184 Beli City: Black Eart	/ Rd., DY.	illage	// //5 / 20//_ (Month) (Day) (Year)
JIM BENNETT		ify): I reside at <u>6238</u>	HWY 78 W dence – Street name and Num	MAZOMA	WIE TN  Municipality)
I personally circulated this recall petition and personally of the paper with full knowledge of its content on the date ind	btained each of the signatures on this paper. I know that t	the signers are electors of the jurisdiction of	r district represented by the officel	holder named in this petition. I know the	hat each person signed
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(Circulator's Residence – Street name and Number) (Circulator Municipality) (Name of Circulator) I personally circulated this recall petition and personally obtained each of the signatures of this paper. I know that the signed the paper with full knowledge of its content on the date indicated opposite his or the name know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats. (Month) (Day) (Year)

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	C	
1. David Lang	my hy	Street: 1934 Heathque City: Madtson zip: WI	Town Village Madrson	M /15/20#1 (Month) (Day) (Year)	Email DLAY 4 Phone (Lasts)	
David Peterson	Dar h	Street: 3813 Constitution Dr City: Middleton zip: 53562	Town Village Hid Meton	11/15/2011 (Month) (Day) (Year)	Email Shore C	
3. Christa Miller	With Willey	Street: 5808 1254 St. City: Middleton W1 zip: 53562	Town Village Middleton	11 /15/2011 (Month) (Day) (Year)	Phone	
Matthew N. Mitchell	mel hall	Street: 1141 E. Jahnson St.  Giv. Madison Zip: 53703	Town Village Maison		Phone (	
Lawrence A. Shields	Formere Hull	City: Madison, Cutt zip: 63718	Town Village Madison		Email Phone	
Jeremy Sutter	Soft	Street: # 546 W. Doty St. Apt#3  City: Madison Zip: 53703	Town Village City  Madison	(Month) (Day) (Year)	Email Phone (	
7. Matt Peters	Matter	Street: 47 Bayley Ct. City: Madison W. Zip: 53705	Town Wad SON	Month) (Day) (Year)	Email Phone	
8. K. Corrina Mott	Hot !	Street: 1027 Kendall Ave City: Madison W+ , Zip: 53726	Town Wildge Madison	(Month) (Day) (Year)	Phone (	
9. Jaf Mail	116	Street: 29 - Harry hade City: Wadison, W zip: 57716	Town Village City		Email Phone	
Jennifer Hart	Hat	Street: 704 Charywood Ct. #7 City: Modison, WI zip: 53714	Town Village Madison	15/20 <u>11</u> (Month) (Day) (Year)	Phone (	
MARTINA RIPPO	Certification , (cert	of Circulator, ify): I reside at 423 5. PARK ST. #	3 TOWN OF M	MOGON	Circulators,	

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. Know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats. (Signature of Circulator) (Day) (Year)

Phone

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1. Janessa Fielstad	Janessa Selstad	Street: 1451/2 Highland 84. City: Evansville Zip: 53536	Town Village Evansuille	11 /5/2011 (Month) (Day) (Year)	Email Phone		
Laxe Maxes	Thed Mosses	Street: 424 W. Williams City: Madison zip: 5356	Town Village Weich 30 N	(Month) (Day) (Year)	Phone (		
Matt Johanny	Mila	City: Oconomowow WI zip: 53066	Town Village V	[1   15   20[] (Month) (Day) (Year)	Phone (		
LEE SCHMIDT	Laghmon	Street: 6914 HARVEST MLLRD City: MAD131 N Zip: 53717	Urown City  WAD 150  City	? ( / 15/20 <u>i /</u> (Month) (Day) (Year)	Phone (		
5. Cabidean	AM	Street: 1100 Bruton Apre City: Janes Ville zip: 54535	□ Town □ Village □ City  Squely Village	// / 20// (Month) (Day) (Year)	Email Phone		
6. Rundy GONZALES	Last Monzus	Street: 676 Granit Way City: Sun Prairie Zip: 53590	□Town □Village  PYCity  SUN Prairie	(\( \//5/201/_ (Month) (Day) (Year)	Phone (		
Douglas Klavon	wordk aggred	Street: 361 Raven Lane City: Madison zip: 53704	Town Village Man Son		Phone (		
8. COLEEN HARTY	Colen Horty	Street: 146 BELMONT RD  City: MADISON Zip: 537/4	□ Town □ Village  □ City MADISON	// /5/20// (Month) (Day) (Year)	Email Phone		
MICHAEL WARREW	Merhaellbere	Street: 413 6+hAUR #207 City:NEW GHARUS ZID-53514	Town Village City VCW 66ARUS	// //5/20/1 (Month) (Day) (Year)	Phone (		
DAVID B. PEDERSEN	0500	Street: 812 WOOD ROW City: MAD 150N zip: 53711	Town Village SCity MADISCH	1 /5 /20 il (Month) (Day) (Year)	Email Phone		
Manage Ripped	Certification of	of Circulator	#3 5000	Marcal			

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DAVID B	PEDERSEN	2500	City: MA	Dison	zip:537[[	Scity M	ADISON	(Month) (Day) (Year)
MADE	NA RIPPON		Certification of Circu	2112 5	PARK ST	+ #3	TOWN OF	MADSON
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paper with full know	ledge of its content on the date in	ndicated opposite his of her name. I	know their respective residences give		etition. I am aware that fal	lsifying this certifica	. ,	2.13(3)(a), Wis. Stats. (Official Use Only)
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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1. MICHAEL PIONTEL	Mul Pintet	Street: 314 CROCUS CIRCLES City: MAD136N Zip: 53713	Trown Village City MADISO W	///\$\frac{1}{20}\ldots (Month) (Day) (Year)	Email MICL- Phone
Lari Whitmore	Lou White	Street: 3271 Stone haven Pi.	Drown Village SUN PRARIE	/1 //5/20/( (Month) (Day) (Year)	Phone (60)
3. Dennis A Anderson	Wennish Munum	Street: 2905 SIGGELKOW &	City COPPACE  Copper Co	// /5/20// (Month) (Day) (Year)	Phone (60
* ROBENT WALKEN	All Valler	Street: 533 4 BADD Y DA  City: MAD 150N Zip: 53705	Town Village  City  MAD150   MAD150	11/15/2011 (Month) (Day) (Year)	Email Phone
5. JOHN BELL	John Bell	Street: 423 Sidney Str.  City: Madrey on zip: 53703	Town Village M adisch	(1 / (5/20/1 (Month) (Day) (Year)	Email Phone
6. Johnne Le Page	Johnste Page	Street: 4378 Jordan Br #14  City: McFarland W1 zip: 53558	Stown Town of Dillage Dillage Dillage Dillage	// /5/20 <u>//</u> (Month) (Day) (Year)	Phone
ERIC Busse	In Busse	Street: 478 BADGEN DR. City: EVANSVILLE Zip: 653536	Town Utillage City  UAUSVILLE	///5/20_// (Month) (Day) (Year)	Phone (
8. HERMAN GOLDSTEIN	Hermen Metor	Street: //O NAUTILUS DR.  City: MADISON W/ Zip: 53705	□ Town □ Village □ Chry  MAD/SON	// /5+20// (Month) (Day) (Year)	Phone (
9. Brendan Wildt	Buller	street: 522 State St. & E City: Madison Zip: 53703	Town Village Madis ON	1 /15/201 (Month) (Day) (Year)	Phone (
CATRIMA AHLBACH	an	Street: 1345 Williamson 8t #1  City: Madison Wl zip: 53703	Town Village City Mad Im	II / 15/20II (Month) (Day) (Year)	Email Phone
44 2 2 2 2	Certification of	of Circulator			
MARCINA RUPON	(w)	1122 5 PAQ S- #3	TOWN OF ME	10150 N	

OAT 1917	VY THUSACH C	Ci	y: Madison	C W Zip: J SPCS		
	- I	Certification of	Circulator	// a		44
MARCINA	KIPPON	, (certify)	: I reside at <u>2223</u>	J. PARK ST. #3	TOWN OF	M40150N
	(Name of Circulato	<i>r</i> )	(Circula	ator's Residence – Street name and Ni	umber) (Circulate	or Municipality)
		d each of the signatures on this paper. I know that the				
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1. Alex Teel	AUM	street: 716 Madison ST # City: Madison, WI zip: 53711	Town Village Mades ~	(Month) (Day) (Year)	Email Phone	
2. MIKE WODYN	Mung	Street: 619 PIPER DR City: MADISON WI Zip: 53711	Town Village City  Moelon	// //5/20_11 (Month) (Day) (Year)	Email Phone	
3. Jeanste Frank	Jean He Frehle	Street: 205 S Allan City: Madison   Zip: 53724	Town Village Modorn	// /5/20_11 (Month) (Day) (Year)	Email Phone	
4. Kenneth L. Oksos	Smith I Dler	Street: 805 Kenes Ave	Town Village City  Modum	/     20	Email Phone	
Buldu Breuil	Law Ran Freins	Street: 1665 Monroe St City: Modison Wi zip: 53711	Town Village Rodow	// /5/2011 (Month) (Day) (Year)	Email Phone	
Jane Ferris	Van Fern	Street: 2/02 Jefferson Str City: Madison zip: 53711	Town Village Modusor	11 /15/20 <u>11</u> (Month) (Day) (Year)	Email Phone	
Kate Arnold	Lan June	Street: 169 Talmadox St.  City: Madison zip: 53764	Town Village City WWW.	(Month) (Day) (Year)	Email Phone	
* Elaine Bogen	Elane Boga	street: 23 Walworth Ct City: Mad SOW W, zip: 53705	Town Village City  Mullon	(Month) (Day) (Year)	Email Phone	
9. Holly Henschen	Jolly Junsen	street: 2813 Atward Ave Apt .1  CHY: Madison WI zip: 53704	Town Village City Mullson	(Month) (Day) (Year)	Email Phone	
Nancy Brower	ll Ry	street: 2006 Madish St.  City: Madish zip: 53711	Town Village QCity Modus	Month) (Day) (Year)	Email Phone	
STEPHEN Arms	Certification		Soulth Ar Min	1		

(Name of Circulator)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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Robert Huncosky	Robert Hunosly	Street: 5913 Danville Dr. City: Madison zip53719	Town Village Madison	11 /15/20 11 (Month) (Day) (Year)	Phone (GC
Tim Goers -	Fr. (3.	Street: 625 South Sporney St.  City: Mudistry zip: 53711	Town Village Modusin	11 /5 /20/1 (Month) (Day) (Year)	Email Phone
Katrin Talba	and the	Street: 109 Everglade Prive City: Madisa WI zap: 537/9	Town Village Madds.	11 /1 5 / 20 11 (Month) (Day) (Year)	Email Phone
LYNN Squi	re Tyn Sge	Une madione 537	Town Willage Madiso	// //5/20//  Month) (Day) (Year)	Email Phone
BERNARD LESIBUTRE	BunCles	Street: 2522 MARSHALL PARKWAY City: MADIS CH Zip: 53713		11 /15 2011 (Month) (Day) (Year)	Email Oeval Phone
cente Mrkay	24	Street: 5334 W 57 City: M'   WM   VIII Zip: 5324	D'Eity Mil Naulce	; 1 / ) \$ / 20 11 (Month) (Day) (Year)	Email Phone
Darin J. Harris	Danis .	Street: 2241 Fox Ave City: Madison Zip: \$53711	Town Village Modison		Email Phone
* Nettym	Alut	Street: AGAFOX AVE City: MODISON, Zip: 53711	Town Village QCity WAD SON	$ \iint_{(Month)} \iint_{(Day)} \iint_{(Year)} $	Email Phone
MAZÍA MEYEK	Plane Me	Street: 2152 FX AVE City: 4401500 zip: 53711	Town Uillage	(Month) (Day) (Year)	Email Phone
Monica Dubay	Monia Monday	street: 4102 Cty B city: Wisconvin Dellszip: 53965	Town VISCONAIN O'Village VISCONAIN O'City Vello	11 /(5/20() (Month) (Day) (Year)	Email Phone
C- 1	Certification	of Circulator			·
Sloom Arm	.(.)	150 I maid at 221 Comma	1 CX DOUTH A CON	Moderna	

(Name of Circulator)

(Circulator's Residence – Street name and Number)

(Circulator Municipality)

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Circulators,
Phone

Email

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Committee to

Committee to PO Box 2569 Madison, WI

THE MUNICIPALITY U	SED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS		and the second seco	Madison, WI
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTA
1. Melissa Huggis	Street: 1101 LWLL ST	☐ Town ☐ Village  there	11/15/2011	Email
Sign: / M	citys Marelisan WI zips 53711	(Municipality Name)	(Month) (Bay) (Year)	Phone ( )
Prin: Holly Storck Post	Street 1115 E Wilson St #121	Town Village DeCity	11/1/2011	Email
sign: Wy Tell St	city: Madison zip: 53703	(Municipality Name)	(Month) (Day) (Year)	Phone ( )
3. Megan Cooke Carcagno	Street 2233 Commonweath Ave	D Town D Village D City Mad 56 h	11/15/2011	Email
Sign: Myr Cov Son	chy Madison zipi 53711	(Municipality Name)	(Month) (Day) (Year)	Phone ( )
Print: Smare Dasilia	512429 Old Sack Rd 30/	Town Uvillage	1/15/20_11	Ensgil
Sign:	city: Madison 2112 53717	(Municipality Name)	(Month) (Day) (Year)	Phone ( )
5. Kendall McMining	Street: N472 Schroeder Rd	Town Caledonias	11 /15/2011	Email
Sign:	cin: Fremont WIzip: 54940	(Municipality Name)	(Month) (Day) (Year)	Phone ( )
Stal A 11	Certification of Circulator	1 100 1		<del></del>
I. Printed Name of Circulator)	(certify): I reside at (Circulator's Residence - Street Name and Nu.	UTA (PO / 1 loll Str mber) (Circulator Muni	cipality)	Circulators, Please include your conti

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under 6.12.13(3)(a), Wis, Stats.

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes,

Return by Ja

Committee to PO Box 2569

THE MUNICIPALITY U	SED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALIT THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS			Madison, WI
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTA
1. Print: CHRIS LOWS	Stred: 1606 FORDERS =	☐ Town ☐ Village ☐ City	11/5/20/1	Email
Sign: C, See 200	City: MADISO PAIR 5379	(Municipality Name)	(Month) (Day) (Year)	Phone ( )
2. Tsela Basel	118 N. SPOONER	□ Town □ Village □ City	11/15/20/1	Email
Sign: State of the	MAD. WI \$53726	MADUSON (Municipality Name)	(Month) (Day) (Year)	Phone ( )
3. Frint: Jean Kasten	Street: 1015 Harrian St	☐ Town ☐ Village DCity	1. 1/77-21	Email
Sign: Y-law Klusten	City: Malleon Zip: 537/1	(Municipality Name)	// /6 20 <u>//</u> (Month) (Day) (Year)	Phone ( )
4. Nancy Youngermen	Street: 2445 Fox Ave	☐ Town ☐ Village ☑ City	11 /15 /20_11	Email
Sign: Nancy Youngerman	City: Madison Zip: 5371	(Municipality Name)	(Month) (Day) (Year)	Phone ( )
5. Print: Debevahtoffman	sired: 2702 Sommers Ave #3	Town Village City	v /5/2011	Email
Sign:	cir: Madison zip: 53704	(Municipality Name)	[[ /5 /20]] (Month) (Day) (Year)	Phone ( )
C+ 1 1 01	Certification of Circulator	Made.	_	
I. JEANEN ITY NOW	(certify): I reside at	imber (Circulator Muni	icipality)	Circulators,

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Please include your con

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NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTA
1. Kelleen Onsud  Sign: Lollon Only	Street: 409 South 1st st.	Town Village City  (Municipality Name)		Phone ( )
2.  Print: MARK SHANATHE  Sign: Main Shanna	N 2901 POST RD  City: MAD(SON 219: 537/3	Town Village MAD (SOW) (Municipality Name)	// //5/20// (Month) (Day) (Year)	Phone (
3. Print: John Steill Sign: John Batt	Street: 2010 E WASHINGTON AUE  City: MADISUN Zip: 53704	Town Village AD JU  (Municipality Name)	1 / 15 / 20 <u>1  </u> (Month) (Day) (Year)	Stells Phone ( )
4.  Print: Diane Wadzinski  Sign: DDQDJMM	street: 6225 TillerTV1  City: Madison 219: 53719	Town Village City  Madisan  (Municipality Name)	///5/20_// (Month) (Day) (Year)	Phone ( )
5.  Print: Constance Squire  Sign: Constance Squire	Street: 587 Park Lone  Madison WT 53711  City: 21p:	Town   Village   Mark & St. (Municipality Name)	(Month) (Day) (Year)	Phone ( )
I. Stephen Arnold (Printed Name of Circulator)	Certification of Circulator (certify): I reside at	th Av Modes	cipality)	Circulators, Please include your con

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Committee to

PO Box 2569

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CO
1. Courtney Nelson	Continy Miss	Street: N8427 County RdH City: Whitenester zip: 53190	Town Willage Ch, Tewnter	(Month) (Day) (Year)	Email CNUSSON 3 Phone (970)
Saran Joros-Withown	841	Street: U25 Adums 52.	Town Village Madusor	1\ /5/201\ (Month) (Day) (Year)	Phone (715)
3. Jule Marks	fullMalls	Street: 720 Weall Van dag ild City: Coffage grove zip: 535 ZJ	Town Village Cott of Grove	(Month) (Day) (Year)	Email Wactywa Phone (608)
4. Mary Jane Schuchardt	May Jane Schuchard	street: 1200 River AVE East  City: Ladysmith zip: 54848	Trown Village LAdy Smith		Phone ( )
J. Bullock	T.G. BULLOCK	Street: 2/4/ROWAEYAVE City: MADISONWISCZID:53726	Town Village Modern	M //5/20// (Month) (Day) (Year)	Email Phone
6. Michael Olneck	Whole Olneck	street: 1932 West Lawn Are,  City: Mardison zip: 537//	Town Village Modern	// //5 / 20 // (Month) (Day) (Year)	Phone ( )
7. Francis Schrag	Francis Schrag	Street: 1921 W Lawn City: Madrian zip.53711	Town Village Wodows	// /5/20 <u>//</u> (Month) (Day) (Year)	Phone ( )
8. /-/NDA FARISS	Leula Fariss	Street: 100 W. Garfield #J City: MOUNT HORER Zip: 53572	Town Willage MT Horub	///5/20// (Mouth) (Day) (Year)	Phone ( )
Jennifer Darson	Hand	Street: 202 S Moduala Blud City: Madism wil zip: 53705	Town Willage Modern	/ 5 / 20	Phone ( )
10. Achol Warrich	m	Street: 50/ Eugenia Ave	Town Willage Modern	11 /15/201 (Month) (Day) (Year)	Phone ( )
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Phone Email

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. KATE EDWARDS	Kafe E. Edwards	Street: 2422 FOX AVE City: MAD (SON Zip: 53711	Town Wadison	(Month) (Day) (Year)	Email Phone	
2. Christopher Kelly	CEX	Street: 1108 Grant Street City: Madison Zip: 53711	Town Village Mad (SON	11 /15/20_1 (Month) (Day) (Year)	Email Phone	
3. MICHAEL SHEETS	Juls	Street: 5010 RISSER Rd  City: MADISON Zip: 53705	Town Village City MAD (SON)	[( /(5/20 <u>()</u> (Month) (Day) (Year)	Email Phone	
Fred Best	1 ABert	Street: 1325 Whenona Dr.  City: Madison Zip: 53711	Town Village Specity  Madison	(Month) (Day) (Year)	Email Phone	
5. Sharon Johnson	Tharon Shin	street: 2545 Marshall PKwy City: MADISON Zip: 53713	OXTOWN  Uvillage City  Village	11 /15/20_11 (Month) (Day) (Year)	Email Phone	
andrea Williams	Andrea Willia	Street 57 20 Old Midleton Road	Town Village City  Madison	// //5/20_// (Month) (Day) (Year)	Email Phone	•
7. Kwame A. Be-Mel	Yourse N. Breyo	Street: 16 22 MONROE START 53711  City: MADISON Zip: 5371	Town Village Mad 50 N	/ /5/20_11 (Month) (Day) (Year)	Email Phone	
Brane Laurer	Montaurer	street: 909-Harrison St Modison 53:1/1	Town Village Madi Sam	(Month) (Day) (Year)	Email Phone	
MNNBJORKMAN	f3jnkman	Street: 1910 W. Faum Ave City: Madison zip: 53711	Town WAD(SON	1 /15/2011 (Month) (Day) (Year)	Phone (	
10. Rima DABBle	Purs	stree 2013 Machison St  City: Madiga Zip:	Town Village WKA 50;	// //5 20 11 (Month) (Day) (Year)	Email Phone	
	(1 Certification	of Circulator 53211				

1.11.122.186.6	city: Madyan	Zip: City	(Month) (Day) (Year)
Stale Alle salle	Certification of Circulator	11 53HI . W	0<1
, Stephen Nathans-Kelly	, (certify): I reside at	Monroe J.	City of Madion
(Name of Circulator)		dence – Street name and Number)	(Circulator Municipality)
I personally circulated this recall petition and personally obtained each of the signatures	on this paper. I know that the signers are electors of the jurisdiction of	r district represented by the officeholder	named in this petition. I know that each person signed
the paper with full knowledge of its content on the date indicated opposite his or her nar	ne. I know their respective residences given. I support this recall petiti	on. I am aware that falsifying this certifi	cation is punishable under S.12.13(3)(a), Wis. Stats.
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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
reather Conninsham	ge or	Street: 1622 Monroe St Apt A City: Madison Zip: 53711	Town Village KCity Madi Sca	11 /15/2011 (Month) (Day) (Year)	Email Phone
Sacoveline Hind	Garathin	Street: 7414 Seeved Bluff City: Wadson zip: 53719	Town Village City  Wadson	(Month) (Day) (Year)	Email Phone
Tom Kuricki	1011	Street: 1731 REGENT ST City: MADISON Zip: \$3726	Town Village Madis	/// 15/20_// (Month) (Day) (Year)	Email Phone
Sve Dane	Seepere	City: MADISON Zip: 53726	Town Village Wity  HADISON	// //5/20// (Month) (Day) (Year)	Email Phone
Peter Luisi-Mills	MAS	Street: 8 30 S. Gammon R1. #/	Town   Village   Machilog	// /5/20_// (Month) (Day) (Year)	Email Phone
Jesse Lyons	6	Street: 883 Harper Dr City: Velona W.I zip: 53593	□ Town □ Village ☑ City  Veron  □	///5/20// (Month) (Day) (Year)	Email Phone
Kim Kreitinger.	Kym Kr	street: 2228 Monroe St City: Madison zip: 53711	Town Village Madison	// //5 <sup>-</sup> /20 <u>11</u> (Month) (Day) (Year)	Email Phone
John Harrington	XMn Hongts	street: 133 Larkin St City: Madison W zip: 53705	Urown O'Village City  MAJKM	////5/20 <u>1/</u> (Month) (Day) (Year)	Email Phone
MPTIN MENOCAL	Mat-Mencal	Street: 4021 EUCLID AVE  City: MAD ISON WI Zip: 53711	□ Town □ Village  P City  MD150	11/15/20 <u>11</u> (Month) (Day) (Year)	Phone (
rebecca Frank	Roll	Street: 550   OSborn D/ City: McFarland WI zip: 53558	Down  Swillage  City  (Farland	11 /15 /20 11 (Month) (Day) (Year)	Email Phone

10.	· \			Street: 550 \	OSborn	DI	□ Town □ Willage		11 /15/2011
Rebeco	a frank	7000	w-	city: MCFarl	and WI	zip: 53558	City M(	Farland	(Month) (Day) (Year)
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. Michaelh Appa	Makelle	Street: 20/3 Madison St.	Town Village Ta dison	///5+20// (Month) (Day) (Year)	Email Phone
2. Vnisine Fors-Reperkor	n Kush Dors M	Street: 515B Whitamb Dr.  City: Madison WI zip: 53711	Town Village Mad 150 N	// /5/2011 (Month) (Day) (Year)	Phone (60%
SEAN KNICK	Slan Kiely	street: 4605 Windigo Tr. City: Madison zip: 53711	Usual Scity Machison	1\ \/15/20_11 (Month) (Day) (Year)	Phone (
David J. Reichenbege	r Daniel T. Reichenbelo	Street: 1632 Monree ST. F City: Madison zip: 53711	O'Village MADISON	11 / 13/20 11 (Month) (Day) (Year)	Email Phone
Cosalin OZeros	Kosolin Deid	Street: 7) 18 (5/4 n 5 5 ) 1/1 City: 14 ( 5 N 2 ip: W )	O Town Wadison	// / / 20// (Month) (Day) (Year)	Email Phone
Stephanie Bestord	Aglaine About	Street: 4121 Hillcrest Dr City: Madison Zip: Wi	Urillage Nadison	11 /15/2011 (Month) (Day) (Year)	Phone (608)
r. Steffense Williams	sufferie Williams	Street: S72201d Middleton Rd.  City: Madison W1 zip: S370S	Urillage Mad ism	11 /15/2011 (Month) (Day) (Year)	Email. Shwill Phone
BARIA K.	Maria K	Street: 2730 LAKELAND City: HADISON Zip: 53704	Urillage State OISON	// /5 720// (Month) (Day) (Year)	Email MK
Laila Borothin	Y	Street: 2214 Mond St City: Madison zip. 53711	Town Village Madison	(/5/2011 (Month) (Day) (Year)	Email Phone
Debra Griffith	Debra & Partlet	Street: 2225 Wastlawn Ave City: MADISON WI Zip: 53711	Town Village City Maison	// /3/20 <u>//</u> (Month) (Day) (Year)	Email Phone

(Circulator's Residence - Street name and Number) (Circulator Municipality) (Name of Circulator) I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their residences given 1 support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats. (Month) (Day) (Year)

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PO Mac THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT SIGNATURES OF ELECTORS MUNICIPALITY OF RESIDENCE DATE OF SIGNING PRINTED NAMES OF ELECTORS STREET & NUMBER OR RURAL ROUTE CON Rural address must also include box or fire no. (Indicate Town, City, or Village) Email ☐ Town Martha Nack ☐ Village Phone City (Month) (Day) Email ☐ Town 11 /15/20<u>11</u> □ Village City Phone Email ☐ Town ☐ Village Phone **⊈**City Email ☐ Town 15/2011 ☐ Village Phone **⊠**City Email 5/2011 Village City Phone (Month) (Day) Email ☐ Town City Phone zip:53726 Email □ Village Phone . Eity Email ☐ Town 11/5/20/11  $\square$  Village Phone Email Phone Email Phone

DEAN		City: MAQUES ON	zip: \$\ \S\ \S\ \7/1/ \  \q \City	11/1001/2011	(Month) (Day) (Year)
"Dang Scheckel	Jann She	Street: 1915 JEFFERSON City: M4d, Sur	St. Town Village	Madison	(Month) (Day) (Year)
ROBER P. PIERSON A.	Royer P. Pierson &		VE D Town Village	Madison	// //5/20_1/ (Month) (Day) (Year)
Stephen Nathan (Name of Circul	W-Kelly	ation of Circulator, (certify): I reside at	MONITOR St. dence – Street name and Number)	Cify of M	ad i SOM Aunicipality)
personally circulated this recall petition and personally obtathe paper with full knowledge of its content on the date indiction (Month) / (Day) / 20 (Year)				r named in this petition. I know the fication is punishable under S.12.	nat each person signed
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1. JULIE WILKE	Juli Telke	Street: 5525 Englewood Dr.  City: Madison W1 zip: 53705	Town Village Woity  Madison	(Month) (Day) (Year)	Email Phone
2. John Gruben	The Dely	Street: 1431 Drake St City: Halison Madison Zip: 53911	Town Village City Halsm	// / 3 20 // (Month) (Day) (Year)	Email Phone
3. Tellervo Zoller	Tela Fair	Street: N3199 MIMILIAN ROW City Land W 2 Zip: 53955	Town Decorate Sold Porhette Sold	(Month) (Day) (Year)	Email Phone
4. JANET BIRCH	Janet Buch	Street: 817 MIAMI PASS City: MADISON Zip: 53711	Town Village Madison	/15/204 (Month) (Day) (Year)	Email Phone
5. Katie Gletty Sycen	Kati Tilthon	street: 6118 Johnson St. City: McFarland zip: 53558	Town Svillage Mc Fav And	/\ /15/2011- (Month) (Day) (Year)	Phone (608
Jossica Omdahl	40mdall	Street: 10 MISA Ct. #3  City: Madison N1 zip: 53719	Town Village Madi(6 N	/ 15/2011 (Month) (Day) (Year)	Phone (
Jessica Fields	Jessica Fields	Street: 11 Virginia Ter City: Madison WI zip: 53726	Town Village Madison	11 /15/2011 (Month) (Day) (Year)	Email Phone
	le's Katulous Burdu	Street: 2234 MONFOE St59711	Town Village Madison	// /15/2011 (Month) (Day) (Year)	Email Phone
9. Amy Liem	Ay Lie	Street: 515 W. Olin Ave City: Madison Zip: 53715	Town Walson	11/15/2011 (Month) (Day) (Year)	Email Ciem C Phone
10. TODD M. WAMBOLD	Total Jeg	Street: 426 WESHMORLAND BLUD City: MATISON Zip: 53711	Town Willage WWJ SON		Phone (
Stephen Sathans		of Circulator  tify): I reside at 252 MON FOR St.  (Circulator's Residence – Street name and		Madison Municipality)	Circulators Phone

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(Month) (Day) (Year)

Email

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1. Rachel Lander	Rachel Soman	street: 2310 West Lawn Ave.	D Town D Yillage City Make Son		Email Phone	
2 Jin Beirne	Jour Dein	street: 64 Leonard of 53711  City: Madison zip:	Drown Village Madison	(Month) (Day) (Year)	Email Phone	
3. Sherry Huhn-Gotzler	Merry huh Dha	Street: 2321 Kayes De City: Madison Wi zip: 5371)	Down Village Madison	(Month) (Day) (Year)	Email Phone	
Dawn McCluskey	Dallachellenkey	Street: 2241 Fox Ave.  City: Madison zip: 53711	Town Village Natison	/ 5/20 <u>   </u> (Month) (Day) (Year)	Email Phone	
Traci M. Nathans-Kelly	h- Northfull	Street: 2252 Monroe St City: Madism W1 zip: 537 11	Drown Village Madism	(Month) (Day) (Year)	Phone (	<u> </u>
KEN STEENE	Kuh S Die	Street: ZOW MOUROS  City: WADIS ON Zip: 53711	Town Village MadiSon	(Month) (Day) (Year)	Email Phone	
MELINDA M.BALLEY	Melinda VIBailey	Street: 2545 MARSHALL PKWY City: MADISON WI Zip 53713	□ Village MADISON □ City	(Month) (Day) (Year)	Email Phone	
8. RICHARD MARGOLIS	Ellund	Street: 2967 WOODS EDGE WAY City: MADISON WI Zip: 53711	D'Town FITCHBURG	11 /15/2011 (Month) (Day) (Year)	Email V W	iANC
9. Priscilla B Mather	PusalleB Mather	Street: 641 Sheldon St City: MADISON WI Zip: 53711	□ Town □ Village  ■ City Madison	il /15/2011 (Month) (Day) (Year)	Email Phone	
Nelson F. Balke	Ned & Balle	Street: 222 Forest St. City: Madison WIZip: 53726	Town Uvillage FCity  Madison	// /5/20((	Email Phone	ralk
Stanhan Nathans	Certification		St Cillian A	1.1500		
こうな せん かけ おこ カソロスコクカオリシン	K V /I LI #	J`\ \~ R/W//////	/H / 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11 /1 1.43 \6 1/1		

_ Stephen Novinans Re	(certify): I reside at	2252 MOVING OF.	CILL OF Males SON
(Name of Circulator)		(Circulator's Residence – Street name and Number)	(Circulator Municipality)
personally circulated this recall petition and personally obtained eac			
ne paper with full knowledge of its content on the date indicated opp	osite his or her name. I know their respective esidences given.	I support this recall petition. I am aware that falsifying this certific	ation is punishable under S.12.13(3)(a), Wis. Stats.
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(Month) (Day) (Year)	(Signature of	f Circulator)	# 1189

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1. AMY Pucco	Sheyllkices	Street QG Trou	Town Willage Wad (507	///\$20 <u>//</u> (Month) (Day) (Year)	Email Phone	
2. ARTHUR ROSS	goth Ros	Street: 411 SIDNEY ST  City: MADISON WI Zip: 53703	□ Town □ Village Socity	11 / 1 20 1 (Month) (Day) (Year)	Email Phone	
3. William Knobeloch	William Kar Below	f/2115 M. 1 /11	Town Village Madison	// /5/20// (Month) (Day) (Year)	Email Phone	
Jennifer Rhodes	Jennifer Shodes	Street: 1306 Prospect St.  City: Watertown, W1 zip: 53098	Town Village Water town	// //5/20 <u>//</u> (Month) (Day) (Year)	Email Phone	
Fateick Hoeth	Patrick Doese	Street: 302 N. 6th St City: MADISON Wi zip.53704	□ Town □ Village △ City Maduson	1\ \\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	Email Phone	
6. Wendy Barton	Wendy Bowton	Street: 4317 Crawford Dr City: Madeson W/ Zip: 53711	□ Town □ Village □ City Madeson	// /5/20 <u>//</u> (Month) (Day) (Year)	Phone (	
JUSAN CASTLE	Susan Castle	Street: 496 Told St.  City: Verona WI Zip: 53593	Town Uvillage City Verona	)1 / 15/20/// (Month) (Day) (Year)	Phone (	
8. Rosmery Cuya	Me	Street: 1302 Glacier Hill Diver	Town Village Nad1500		Email Phone	
JEROME FLOWERS	Jan Jan	Street: 1302 GLACIER HILL DR City: Madi Son W/ Zip: 53704	□ Town □ Village  ☑ City  ✓ Made Som	11 /15/20 1 / (Month) (Day) (Year)	Email Phone	
10. SUSAN A REBELLO	Sucan & Rehell	Street: 564 CENTER RD  City: OREGON [N] Zip: 53575	Town Utiliage City RUTLAND	// /5/20// (Month) (Day) (Year)	Email Phone	
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	Certifica	ation of Circulator			
_	ATINE BENISHER -CLARK	, (certify): I reside at	402 SUDB	ulyway	MADISON, WI
	(Name of Circulator)	(Circ	rulator's Residence – Street i	name and Number)	(Circulator Municipality)
рe	ersonally circulated this recall petition and personally obtained each of the signatures on this paper. I kn	now that the signers are electors of th	e jurisdiction or district represen	ited by the officeholder name	d in this petition. I know that each person signed
e	paper with full knowledge of its content on the date indicated opposite his or her name. I know their re	espective residences given. I support	his recall petition. I am aware th	nat falsifying this certification	is punishable under S.12.13(3)(a), Wis. Stats.
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☐ Village Phone City Madison Email □ Town ☐ Village Phone (Month) (Day) (Year) Email Town ☐ Village Phone Email Phone Email □ Town ULTMANKO □Nillage Phone City Email 10. □ Town ☐ Village Phone City zip: 537// Certification of Circulator

ANNE SENISHEK-CLARK, (certify): I reside at 5402 SUDBURG WAY (Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)  Dersonally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed are paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.  Page No. (Official Use Only)	_		COLU	iicanoii oi ciicaian	,,		_		
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e paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.	· · · · · · · · · · · · · · · · · · ·			-	(Circulator's Re	esidence – St <del>reet name d</del> n	d Number)		
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Karen Schwanz _	Main	Street: 428 D Car City: Madison	Zip: 53703	Madison 11/15/2044
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I Tamela Campbell		certify): I reside at 1529	Drewry LN	<u>Madison</u>
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1. Mathew Priobe	Mat Friday	Street: 22 South Franklin star	Urillage Madisen	(Month) (Day) (Year)	Email Phone
Chris Anderson	cinco	street: 22 South Franklin#1  City: Madison zip: 53703	Docty Madis	(Month) (Day) (Year)	Email Phone
Thomas L. Partle	Thurst bell	Street: 5235 Springer Rod City: La Valle wit zip: 53941	Prown City La Valle	(//15/2011 (Month) (Day) (Year)	Email Phone
Januar D. Box	Ins	Street: 28 S. Franklin St.  City: Mades on Zip: 53703	Town Village Pacity Madrson	///5/20// (Month) (Day) (Year)	Phone (
Jim Tousey	1 Susur	Street: 251 N. MUSKET RIDGE City: SUN PRAIRIE Zip: 53590	Town Village  City Sur PRAIRIE	///5/20 <u>//</u> (Month) (Day) (Year)	Email Phone
Laura Ruskaup	Laurah Ruskang	Street: 112 S. Franklin St. City: Madison WP Zip: 53703	Town Village PCity  Madison	/ 5/20 <u>   </u> (Month) (Day) (Year)	Email Phone
STACY GRANDT	Story S. A	Street: 108 S. Franklin St City: Medison WI zip: 53703	Drown Dyllage Great  Madison	(Month) (Day) (Year)	Email Phone
8. Brian Grandt	BM	Street: 108 5 Frukinst City: Madison, w.D. zip: 53703	Town Uvillage City CacleSon	(Month) (Day) (Year)	Email Phone
9. Elizabeth Connor	Masily Comon	street: 132 S Franklin St City: Madison Wl zip: 53703	Town Village  City Madison	11 /15/20 11 (Month) (Day) (Year)	Email Phone
Benjamin Dickey	Bujan N. Die	Street: 1325. Franklinst. City: Madison, WI zip: 53703	Town Village  Getry  Mad Son	(Month) (Day) (Year)	Email be wind Phone
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(Name of Circulator)

(Circulator's Residence – Street name and Number)

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1. Daniel Callahan	Daniel Callahan	Street: 5/22 Tomahaw K Trail City: Madison WI zip: 53705	Town Village Madeson	11/15/2011 (Month) (Day) (Year)	Phone (
Emily Frazos	Enlemalos	Street: 636 E (1983 h 1978 A) City: MON 500 Zip: 5570)	Town O'llage City Madison		Phone ( )
3. Kreychmoon	Hoters Dohner	Street: Modern 53704	Town Village City Madrs on La	Month) (Day) (Year)	Phone (
Rebeccamerril	Ebecca Verile	Street: 63D E, # Dashington Ave City: Madison zip: 53703	Town Village Madison	1/ /15/20/1 (Month) (Day) (Year)	Phone (
Welman T. Blog	Wilnes T. Blog	City: Madison, W1 zip: 537/8	Town Village Madism	(Month) (Day) (Year)	Phone (
Steven Itom	Stewn Ston	Street: 1490 Marsin GT.  City: Madison Zip: 58703	Town Village Madison	W /15/2011 (Month) (Day) (Year)	Phone (
Nicholas Bayren	Mille	Street: 5170 Anton Dr. Apt. 13	Town Se willage Fitch burg	// //5/20[/_ (Month) (Day) (Year)	Phone (
8. Chanda Sonn kirner	Charda John al from	street: 163 Rapy G.  City: Mad 189 Zip: 537/5	Town Village City Mode Sur	/ 1 /15/2011 (Month) (Day) (Year)	Phone (
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	(Name of Circu			nce – Stre <b>k</b> t name and Number)	(Lirculator M	
I per	sonally circulated this recall petition and personally obt	tained each of the signatures on this paper I know tha	t the signers are electors of the jurisdiction or d	istrict represented by the officeholde	r named in this petition. I know th	at each person signed
the 1	paper with full knowledge of its content on the date indi	cated opposite his or her name. I know their respective	e residences given. resupport this recampetition	all talls if ying this certif	neation is punishable under S.12.1	3(3)(a), W18. Stats.
	(( 1 15 120 ((	Mare	n Ausse		Page No. (Of	ficial Use Only)
-	(Month) (Day) (Year)		(Signature of Circulator)		1.90	
	(Month) (Day) (XVIII)				#	
				9		

THE MUNICIPALITY USED FOR MAILING	G PURPOSES, WHEN DIFFERENT THAN MUNICIPAL	TTY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	ICIPALITY OF RESIDENCE MUST ALWAY	S BE LISTED.
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
JANET OLSEN	Janet Olsen	Street: 717 Kingston Way #1  City: Warenakee zip: 53597	Drown Ryillage Channelse	////5/20// (Month) (Day) (Year)
Amelia Royko Maure		street: 342 5. Madison St City: Evans V, Le W zip: 53536	Village E OMSU LL	/// 5/20 (Month) (Day) (Year)
Jane Kinney	Jane Kinne	Street: 77 S. Fair Ouks City: Madison W. Zip: 53714	Town Village MAd15 on	(Month) (Day) (Year)
Late Kollman	Katernen	Street: 5763 Ballina Plan City: Fitch by 21pt 5371	Da Town Syllege C. Tackborg	(Month) (Day) (Year)
Robert Nixen	and is	Street: 1933 West Lawn Are City: Madison Zip: 53711	Town Village SerCity  MAUISON	// /5/20_{(Month) (Day) (Year)
Elizabeth Leu-Williams	Bort Cartch	Street: 1912 West Lown Ave City: Mcdison, Wi Zip: 53711	Town Village Madism	(Month) (Day) (Year)
laura L. Buss	Jaura & Buss	Street: N1173 Steckelberg Brive.	Trown Village Police de Sne	
Samantha Neymark	Somar Co Byras	street: 1315 Bowlen C4 city: Muelism, Wi zip: 53715	Town Village City  Modify	(Month) (Day) (Year)
Jane Rodemeier- Schloesser	Rodomare Schour	Street: 2984 Chapel Valley Rd #210	Town Village Frehburg	11/15/2011 (Month) (Day) (Year)
MARK Seidenberg	Markey	Street: 3602 BLACKHAWK DK City: MAVISON WI Zip: 53705	Town Village Modisor	(Month) (Day) (Year)

(Circulator Municipality) (Circulator's Residence - Street name and Number) (Name of Circulator) I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their represented by the officeholder named in this petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats. 15 Page No. (Official Use Only) (Month) (Day) (Year)

Circulators, pl

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